09/068528 APPLICANT(S) FILING DATE MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875) CLAIMS AFTER AFTER 1st AMENDMENT 2nd AMENDMENT AS FILED IND. DEP. IND. DEP. IND. DEP. IND. DEP. IND. DEP. IND. DEP. ュ (r) 71) ð ょ える a TOTAL

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